Please type a plus sign (+) inside this box —	→ [\exists
r icase type a plas sign (*/ moide ans box	- 1	

a valid OMB control number.

Filing

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains

Attorney Docket Number 38-21(52258)B DECLARATION FOR UTILITY OR **First Named Inventor** Carl Frederick Behr **DESIGN** COMPLETE IF KNOWN PATENT APPLICATION **Application Number** (37 CFR 1.63) Filing Date ■ Declaration ☐ Declaration Group Art Unit Submitted OR Submitted after Initial Filing (surcharge with Initial (37 CFR 1.16 (e)) required)

Examiner Name

As a below named inven	tor, I hereby declare that:				-					
My residence, post office address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Corn Event PV-ZMGT32(nk603) and Compositions and Methods for Detection Thereof										
the specification of which (Title of the Invention) is attached hereto OR										
was filed on (MM/D	D/YYYY)	as Ur	nited States Applicat	ion Number or PC	CT International					
Application Number	and wa	as amended on (MM/DE)/YYY)		(if applicable).					
amended by any amendme	eviewed and understand the ont specifically referred to about the control of the	ve.			ims, as					
Tuomiomicago sio daty to a		material to pateritability								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.										
Prior Foreign Application Number(s)	Country	Foreign Filing Dat	e Priority Not Claimed	Certified Co YES	py Attached?					
		,								
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:										
	nder 35 U.S.C. 119(e) of any	United States provision	nal application(s) list	ed below.						
Application Number	(s) Filing Date	e (MM/DD/YYYY)								
60/213,567	06/22/2000			onal provisional ers are listed on						
60/240,014	10/13/2000			mental priority of B/02B attached						
60/241,215	10/13/2000									

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Please type a plus sign (+) inside this box ->

PTO/SB/01 (12-97)
us sign (+) inside this box

+ Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DE	<u>CLA</u>	RATIO	<u>N</u> _	<u> U1 </u>	tility	or v	De	sigr	1	Pate	nt .	App	olicatio	n
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.														
U.S. Parent Application or PCT Parent Parent Filing Date Parent Patent Number (MM/DD/YYYY) (if applicable)														
		PCT internation												
		hereby appoint the onnected therew		ring regis Custom OR			(s) to p	rosecute	this	s application	and to	transac	Place Cust Number Bar	omer Code
				Register) name	/registra	tion	number lis	ted bel	low L	Label he	
	Nam	e			Regist Num			<u> </u>		Nam	e			stration mber
See 1 in A	See 1 in Addendum													
X Additiona	l registere	d practitioner(s)	named o	n supple	emental	Register	ed Prac	titioner	Info	ormation she	et PT0	O/SB/02	C attached here	eto.
Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto. Direct all correspondence to: Customer Number or Bar Code Label 27161 OR Correspondence address below														
Name	Gail	Wuellner, l	Patent	t Dep	artme	ent, M	lonsa	anto (<u> </u>	mpany				
Address	8001	N. Lindberg	gh Bo	uleva	ırd									
Address	Mail	Zone E2N.	A											
City	St. L	ouis						state	M	O	ZIP	631	67	
Country	USA			Tel	ephon	e (63	6) 73	7-68	26		Fax	(636	5) 737-60	47
I hereby deck believed to be punishable by	are that a e true; an fine or it	ll statements ma d further that the mprisonment, or t issued thereon.	ese state both, ur	ein of my ements	y own k were m	nowledg ade with	e are t	rue and	tha e th	at all statem	ents n	nade on itements	information ar	d belief are o made are
Name of S	ole or F	irst Invento	r:					A petit	ion	has been	filed f	orthis u	ınsigned inve	entor
G	iven Nan	ne (first and mide	dle [if a	any])						Famil	y Nai	me or S	umame	
Carl Fred	lerick		<u> </u>			- /	В	ehr					,	
Inventor's Signature		6.16	1	7	R	ela		_					Date	5/24/
Residence:	City	Wildwood		State MO Country				US Citizenship US						
Post Office A	ddress	1431 Well	ingto											
Post Office A	Address													
City	City Wildwood State MO ZIP 63005 Country US													
XAdditiona	linvento	rs are being na			l _{2 sur}				Hn	ventor(s) s	heet(s) PTO/	SB/02A attac	hed hereto



Please type a plus sign (+) inside this box ->

PTO/SB/02A (3-97)
Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 2

Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor										
Given Na		Family Name or Surname								
Gregory R. Heck										
Inventor's Signature	Thomas	S.21.01 Date								
Residence: City	Crystal Lake Park	State	MO		Country	US		Citizens	hip (L	IS
Post Office Address 2200 Divor Drive										
Post Office Address										
City	Crystal Lake Park	State	МО		ZIP 6	3131	Country	US		
Name of Addition	nal Joint Inventor, if a	ny:			A petitio	n has been filed	for thi	s unsigr	ned inv	entor
Given Na	me (first and middle [if any])				Family Nan	ne or S	Surname		
Catherine Hironaka Hironaka										
Inventor's Signature								Da	te	
Residence: City	Dublin	State	CA	ı	Country	US		Citize	nship	US
Post Office Address	4727 Fawn Way									
Post Office Address										
City	Dublin	Stat	e CA		ZIP	94568	Coun	try [U	s	
Name of Addition	nal Joint Inventor, if a	ny:			A petitio	n has been filed	d for thi	s unsigi	ned inv	ventor
Given Na	me (first and middle [if any])				Family Nan	ne or S	Surname		
Jinsong				You						
Inventor's Signature	Linguag Jon Date 5					5/2401				
Residence: City	Ballwin	State	мо	MO Country US Citizenship China					China	
Post Office Address	1685 Carman Mill Dri	ve								
Post Office Address						T				
City	Ballwin	State	мо		ZIP	63021	C	ountry	US	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box \rightarrow

Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 2

Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any]) Family Name or Surname										
Gregory R. Heck										
Inventor's Signature	Date _									
Residence: City	Crystal Lake Park	State	МО	Country	US		Citizensl	nip U	JS	
Post Office Address	Crystal Barto I ark Gate Mo Commy Comm									
Post Office Address	2200 DIVOI DIIVE									
City	Crystal Lake Park	State	МО	ZIP 6	3131	Country	US			
Name of Addition	nal Joint Inventor, if ar	ıy:			n has been file	d for this	s unsign	ed inv	entor/	
Given Nar	me (first and middle [if any])			Family Nan	ne or S	urname			
Catherine Hironaka Hironaka										
Inventor's Signature	Catherine Herinara 5/22/01 Date									
Residence: City	Dublin					Citizen	ship	US		
Post Office Address	4727 Fawn Way									
Post Office Address										
City	Dublin	State	CA	ZIP	94568	Count	ry US	S		
Name of Addition	nal Joint Inventor, if ar	ıy:		A petitio	n has been file	d for this	s unsign	ed inv	ventor	
Given Nai	me (first and middle [if any])			Family Nar	ne or S	urname			
Jinsong			You	u						
Inventor's Signature	Date									
Residence: City	Ballwin State MO Country US Citizenship China						China			
Post Office Address										
Post Office Address							T			
City	Ballwin	State	MO	ZIP	63021	Co	ountry	US		

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DOMFEDST TOOL